



15:42

3123722906

ZIMMER TECHNOLOGY

PAGE 06/87

PART B - FEE(S) TRANSMITTAL

Complete and sign this form, together with applicable fee(s), to: Mail

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USPATENT/LEADRESPONSE ADDRESS (Please Use Block 1 for any change of address)

45488

7590

12/09/2004

WILLIAMS, MORGAN & AMERSON, P.C./ZIMMER
10333 RICHMOND, SUITE 1100
HOUSTON, TX 77042

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Jonathan D. Feuchtwang

(Depositor's name)

[Signature]

(Signature)

18 Feb 2005

(Date)

02/22/2005 MBIZUNE2 00000069 502779 10613330

01 FC:1506

821.00 BA

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10613330

07/03/2003

Eric M. Johnson

101-439

5059

TITLE OF INVENTION: CONSTRAINED ACETABULAR LINER

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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non-provisional

NO

\$1400

\$300

\$1700

03/09/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
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ISABELLA, DAVID J

3738

613-012340

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.33).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/123) attached.☐ "Fee Address" indication (or "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list:

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

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Jonathan D. Feuchtwang

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation in the USPTO. Completion of this form is NOT a prerequisite for filing an assignment.

(A) NAME OF ASSIGNEE

Zimmer Austin, Inc.

(B) RESIDENCE (CITY AND STATE OR COUNTRY)

Austin, Texas

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☒ Advance Order - 5 or Copies☐ Payment of Fees☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-203R is attached.☐ The Director is hereby authorized to charge the required fee(s), or credit any overpayment to Deposit Account Number: 601-2779 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

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The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assigned or other party in interest as shown by the records of the United States Patent and Trademark Office.

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[Signature]

Date

18 Feb 2005

Typed or printed name

Jonathan D. Feuchtwang

Registration No.

41,017

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OMB 0651-0033

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RTFM File

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From: <u>PG</u>	Location: IDC EMF FDC	Date: _____
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REV 10/04